

Family's Plan

FACS ID #
Family Name:

Court Docket #
Date of Plan:

Family Team Members

Who are the people involved in this plan to make it work?

Is there anyone else who should be invited to participate in developing the next plan?

Strengths

What are the strengths of the family?

[Include family's statements during the meeting with the family and information gathered during assessments]

Concerns

What are the concerns or needs of the family that keep them involved with DHS.

Why are we here?

[Include families statements during the meeting with the family and information gathered during assessments]

Supports

What are the supports, either in the family or in the community, that are present or can be built upon to help address the concerns or needs outlined above.

Outcomes

How will we know when we are done? What will you look like as a family? When do we think this can be accomplished? (Include specific date)

Behavioral Results

What are the specific behaviors that must change to reach that end point?

Specifically, what behaviors place the child/children in this home at risk?

Action Steps

What are we going to do?	Who's going to do what?	By When ?

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Safety Plan

What actions must be taken in order to provide a safe and stable environment for the child and family at this time?

Crisis Plan

What do we do if some part of the plan breaks down and a crisis occurs?

Re-evaluation Plan

What are our next steps and when do we get back together? (Include next meeting date)

Agreement

We made this plan: (date)

We are the team members who were here or who were consulted:

(Please identify who was present and who was not)

We agree to help this plan succeed to the best of our ability, and will work hard to meet the expectations outlined above. We also agree any one of us can pull the group together as is reasonable to work out unforeseen issues and to celebrate successes along the way.

Signature		Date
DHS Social Worker Signature:		
Parent Signature		
Second Parent Signature:		
DHS Supervisor Signature		
Other Team Members Signatures:	Role	

Plan Review

Plan review date:

This case is scheduled to close

Review of progress including tool incorporation:

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